

Fact Sheet

Managed Care Populations and Enrollment Notices

NC Medicaid

County Playbook: NC Medicaid Managed Care

While most Medicaid beneficiaries will enroll in NC Medicaid Managed Care, some people will not. This Fact Sheet outlines who must enroll, who cannot enroll, and who has a choice, and it shares the notices that each group will receive. These groups, or populations, will be further defined for DSS staff in NC FAST in the “Managed Care Status” field. The table below shows the beneficiaries who are included in each Managed Care status.

Group	Beneficiary Group/Program	Managed Care Status in NC FAST
MUST ENROLL IN A HEALTH PLAN (Mandatory)	Most Family & Children’s Medicaid, NC Health Choice, Pregnant Women, Non-Medicare Aged, Blind, Disabled (this includes beneficiaries residing in Adult Care Homes)	Mandatory – Standard Plan
CANNOT ENROLL IN A HEALTH PLAN (Excluded)	Emergency Services Only	Excluded – Emergency Services Only
	Medicaid Be Smart Family Planning Program	Excluded – Family Planning
	Health Insurance Premium Payment (HIPP)	Excluded – HIPP
	Incarcerated individuals	Excluded – Incarcerated
	Medically Needy (spend down)	Excluded – Medically Needy
	Program of All-Inclusive Care for the Elderly (PACE)	Excluded – PACE
	Partial dually-eligible Medicaid/Medicare	Excluded – Partial Dual Eligible
	Presumptive Eligibility	Excluded – Presumptive Eligibility
	Refugee Medicaid	Excluded – Refugee
	COVID-19	Excluded – COVID
MAY ENROLL IN A HEALTH PLAN (Exempt)	Federally recognized tribal members or others eligible for Indian Health Service (IHS)	Tribal – Exempt
		IHS – Exempt
		IHS – Non-EBCI – Exempt



		Tribal – Temporarily Exempt – Tailored Plan
		IHS – Temporarily Exempt – Tailored Plan
	Beneficiaries eligible for behavioral health tailored plans*	Temporarily Exempt – Tailored Plan
MAY ENROLL IN THE EBCI TRIBAL OPTION (Tribal/IHS Excluded)	Federally recognized tribal members or others eligible for Indian Health Service (IHS)	Tribal – Temporarily Excluded – CAP-C
		Tribal – Temporarily Excluded – CAP-DA
		Tribal – Temporarily Excluded – Tailored Plan – Dual Eligible
		Tribal – Temporarily Excluded – Dual Eligible
		Tribal – Temporarily Excluded – Foster Care/Adoption
		Tribal – Temporarily Excluded – Foster Care/Adoption – Tailored Plan
		Tribal – Temporarily Excluded – Foster Care/Adoption – Dual Eligible
		Tribal – Excluded – Medically Needy
		Tribal – Temporarily Excluded – Tailored Plan – TBI/Innovation
		Tribal – Temporarily Excluded – Tailored Plan – TBI/Innovation Dual Eligible
		IHS – Temporarily Excluded – CAP-C
		IHS – Temporarily Excluded – CAP-DA
		IHS – Temporarily Excluded – Tailored Plan – Dual Eligible
		IHS – Temporarily Excluded – Dual Eligible
		IHS – Temporarily Excluded – Foster Care/Adoption
		IHS – Temporarily Excluded – Foster Care/Adoption – Tailored Plan
		IHS – Temporarily Excluded – Foster Care/Adoption – Dual Eligible
		IHS – Excluded – Medically Needy

		IHS – Temporarily Excluded – Tailored Plan – TBI/Innovation
		IHS – Temporarily Excluded – Tailored Plan – TBI/Innovation Dual Eligible
BECOME MANDATORY LATER (Temporarily Excluded)	Community Alternatives Program for Children (CAP-C)	Temporarily Excluded – CAP-C
	Community Alternatives Program for Disabled Adults (CAP-DA)	Temporarily Excluded – CAP-DA
	Resident of a Division of State Operated Healthcare Facilities (DSOHF)/Veterans (VA) Home	Temporarily Excluded – DSOHF/VA Home – Non Dual
	Dually-eligible Medicaid/Medicare	Temporarily Excluded – Dual Eligible
	Beneficiaries who have lived in a nursing facility for over 90 days	Temporarily Excluded – Facility – Non Dual
	Foster Care/Adoption Medicaid	Temporarily Excluded – Foster Care/Adoption
	Foster Care/Adoption Medicaid and receives Medicare	Temporarily Excluded – Foster Care/Adoption – Dual Eligible
	Foster Care/Adoption Medicaid and eligible for tailored plans*	Temporarily Excluded – Foster Care/Adoption – Tailored Plan
	Dually-eligible Medicaid/Medicare and eligible for tailored plans*	Temporarily Excluded – Tailored Plan – Dual Eligible
	Receiving the Innovations/Traumatic Brain Injury (TBI) waiver and eligible for tailored plans*	Temporarily Excluded – Tailored Plan – TBI/Innovation
	Receiving the Innovations/Traumatic Brain Injury (TBI) waiver, eligible for tailored plans*, and dually-eligible Medicaid/Medicare	Temporarily Excluded – Tailored Plan – TBI/Innovation Dual Eligible

*Tailored Plans are specialized plans that offer integrated services for members with significant behavioral health needs and intellectual/developmental disabilities. The target date for these plans to be available is July 1, 2022.

NOTICES FROM THE ENROLLMENT BROKER

A beneficiary's Managed Care status determines which notice he or she will receive from the Enrollment Broker. Notices include details on enrollment status, steps that need to be taken to enroll, and guidance on how to complete those steps. All notices will be labeled with "NC Medicaid" and will instruct beneficiaries to contact the Enrollment Broker with questions. Beneficiaries will likely still contact DSS staff with questions.

Reviewing the sample notices on the [County Playbook](#) will help address these questions. The table below provides a description of each notice and when it will be sent. In addition to notices related to enrollment, we have included two samples of grievance notices beneficiaries will receive from the Enrollment Broker in the event they file a complaint against the Enrollment Broker.

The format in the samples provided may also differ from the actual notices that are mailed to beneficiaries, and titles have been added for your reference (titles will not appear on the actual notices).

Auto-Enrollment Reminder:

Beneficiaries in the Mandatory population who do not choose a health plan will be auto-enrolled in one. In some states, only about 10% of beneficiaries choose their own health plan. Please encourage beneficiaries in your interactions with them to make an informed choice by contacting the Enrollment Broker and choosing their own health plan.

Enrollment Packet Notices

Notice	Description	When is it sent?
Enrollment Packet: Mandatory Transition Notice	Sent to households with beneficiaries in the Mandatory population (people who must choose a health plan). Provides information on how to choose a health plan and how to choose a primary care provider (PCP).	<ul style="list-style-type: none"> Beginning 3/1/2021
Enrollment Packet: Exempt Transition Notice	Sent to households with beneficiaries in the Exempt population (people who have the option to choose a health plan but are not required to do so). Provides information on how to choose a health plan, how to choose a PCP, and how to stay in NC Medicaid Direct.	<ul style="list-style-type: none"> Beginning 3/1/2021
Enrollment Packet: Mandatory and Exempt in Household Transition Notice	Sent to households with at least one beneficiary in the Mandatory population (people who must choose a health plan) and at least one beneficiary in the Exempt population (people who have the option to choose a health plan but are not required to do so). Provides information on how to choose a health plan, how to choose a PCP, and when appropriate, how to stay in NC Medicaid Direct.	<ul style="list-style-type: none"> Beginning 3/1/2021
Enrollment Packet: Tribal-Exempt Transition Notice	Sent to households in which at least one beneficiary is a federally recognized tribal member or eligible for IHS. Provides information on how to choose a health plan (PHP or the EBCI Tribal Option), how to choose a PCP, and how to stay in NC Medicaid Direct. This notice is only sent to eligible beneficiaries in the Tribal service area.	<ul style="list-style-type: none"> Beginning 3/1/2021
Enrollment Packet: Tribal-Excluded Transition Notice	Sent to households in which at least one beneficiary is a federally recognized tribal member or eligible for IHS. Provides information on how to choose the EBCI Tribal Option, how to choose a PCP, and how to stay in NC Medicaid Direct. This notice is only sent to eligible beneficiaries in the Tribal service area.	<ul style="list-style-type: none"> Beginning 3/1/2021
Enrollment Packet: a) Information Sheet b) Enrollment Form c) Health Plan Choice Guide	Sent along with the Transition Notice in the Enrollment Packet to guide beneficiaries on how to choose a health plan and PCP.	<ul style="list-style-type: none"> Beginning 3/1/2021

Other Notices

Notice	Description	When is it sent?
Reminder Notice - Transition	Sent to Mandatory beneficiaries (people who must choose a health plan) who have not already chosen a health plan. Reminds them that they have until May 14, 2021 to choose a health plan.	<ul style="list-style-type: none"> Beginning 4/15/2021
Mandatory – Health Plan Confirmation Notice	Sent to a beneficiary in the Mandatory population (people who must choose a health plan) who chooses a health plan or is auto-enrolled in a health plan. Provides information on how to keep the health plan or change health plans.	<ul style="list-style-type: none"> After the beneficiary has chosen a health plan, or After the beneficiary has been auto-enrolled in a health plan (auto-enrollment begins 5/15/2021)
Exempt – NC Medicaid Direct Confirmation Notice	Sent to a beneficiary in the Exempt population (people who have the option to choose a health plan but are not required to do so) who chooses NC Medicaid Direct or remains in NC Medicaid Direct. Provides information on how to stay in NC Medicaid Direct or change to a health plan.	<ul style="list-style-type: none"> After the beneficiary has chosen NC Medicaid Direct, or After the beneficiary remains in NC Medicaid Direct (beneficiaries in the Exempt population who do not choose a health plan will remain in NC Medicaid Direct)
Exempt – Health Plan Confirmation Notice	Sent to a beneficiary in the Exempt population (people who have the option to choose a health plan but are not required to do so) who chooses a health plan. Provides information on how to keep the health plan, change health plans, or change to NC Medicaid Direct.	<ul style="list-style-type: none"> After the beneficiary has chosen a health plan
Exempt – Newly Exempt Confirmation Notice	Sent to a beneficiary who is currently enrolled in a health plan when his or her Managed Care status changes to Exempt (people who have the option to choose a health plan but are not required to do so). Displays the health plan in which the beneficiary is currently enrolled and provides information on how to keep the health plan, change health plans, or change to NC Medicaid Direct.	<ul style="list-style-type: none"> After the beneficiary who is currently enrolled in a health plan has a change in Managed Care status from Mandatory to Exempt
Excluded – Newly Excluded Confirmation Notice	Sent to a beneficiary who has a change in status from Mandatory (people who must choose a health plan) or Exempt (people who have the option to choose a health plan but are not required to do so) while being enrolled in a health plan to Excluded (people who cannot enroll in a health). Provides the reason for the change.	<ul style="list-style-type: none"> Shortly after the change is reported that caused the beneficiary's status to change to Excluded

Other Notices (cont.)

Notice	Description	When is it sent?
Tribal-Exempt – EBCI Tribal Option Confirmation Notice	Sent to a beneficiary in the Tribal/IHS Exempt population (people who have the option to choose a health plan, including the EBCI Tribal Option) who chooses the EBCI Tribal Option or is auto-enrolled in the EBCI Tribal Option. Provides information on how to keep the health plan, change health plans, or change to NC Medicaid Direct.	<ul style="list-style-type: none"> After the beneficiary has chosen the EBCI Tribal Option, or After the beneficiary has been auto-enrolled in the EBCI Tribal Option (auto-enrollment begins 5/15/2021)
Tribal-Exempt – Health Plan Confirmation Notice	Sent to a beneficiary in the Tribal/IHS Exempt population (people who have the option to choose a health plan, including the EBCI Tribal Option) who chooses a health plan. Provides information on how to keep the health plan, change health plans, or change to NC Medicaid Direct.	<ul style="list-style-type: none"> After the beneficiary has chosen a health plan
Tribal-Exempt – NC Medicaid Direct Confirmation Notice	Sent to a beneficiary in the Tribal/IHS Exempt population (people who have the option to choose a health plan, including the EBCI Tribal Option) who chooses NC Medicaid Direct. Provides information on how to stay in NC Medicaid Direct or change to a health plan, including the EBCI Tribal Option.	<ul style="list-style-type: none"> After the beneficiary has chosen NC Medicaid Direct
Tribal-Excluded – EBCI Tribal Option Confirmation Notice	Sent to a beneficiary in the Tribal/IHS Excluded population (people who have the option to choose the EBCI Tribal Option) who chooses the EBCI Tribal Option or is auto-enrolled in the EBCI Tribal Option. Provides information on how to keep the health plan or change to NC Medicaid Direct.	<ul style="list-style-type: none"> After the beneficiary has chosen the EBCI Tribal Option, or After the beneficiary has been auto-enrolled in the EBCI Tribal Option (auto-enrollment begins 5/15/2021)
Tribal-Excluded – NC Medicaid Direct Confirmation Notice	Sent to a beneficiary in the Tribal/IHS Excluded population (people who have the option to choose the EBCI Tribal Option) who chooses NC Medicaid Direct. Provides information on how to stay in NC Medicaid Direct or change to the EBCI Tribal Option.	<ul style="list-style-type: none"> After the beneficiary has chosen NC Medicaid Direct
Grievance Acknowledgement Notice	Sent to a beneficiary who has submitted a complaint to the Enrollment Broker.	<ul style="list-style-type: none"> Shortly after the Enrollment Broker has received a complaint from a beneficiary
Grievance Resolution Notice	Sent to a beneficiary after a complaint submitted to the Enrollment Broker has been resolved.	<ul style="list-style-type: none"> No later than 30 calendar days after the Enrollment Broker has received a complaint from a beneficiary

Fact Sheets will be updated periodically with new information. Created 2/24/2021.
For more information, please visit <https://www.medicaid.ncdhhs.gov/transformation>.